Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>5/16/2010</u>	Address:	7654 Ford Ridge Rd
Case #:	<u>33-30170</u>		Nashville, IN
County:	Brown		
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)	
Chemic	onal Lab cal/Glassware/Equipment (only) ite (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:
Items Fou	nd: Location (bedroom, kitchen, open a	ir, etc)	
(check all that apply) Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents: Open			
Water I	Reactive Metal (Lithium): Open		
Anhydr	ous Ammonia:		
Hydrochloric Acid Gas Generator(s):			
Corrosi	ve Acid:		
Corrosi	ve Base:		
Other (i	item and location):		
☐ Yes _ ⊠ No	er age 18 discovered (check one) (number present) eport to Child Protective Services	Ephedrin	e Information e/Pseudoephedrine Tracking Log erchant Tip
This repor	t is to be faxed to the following agei	icies that serve the l	ocation:
Fire Depart	tment: <u>FD</u>	Fax: Hand	
Health Department: <u>Brown Co</u>		Fax: <u>812-9</u> Fax:	
Child Prote	ection Service:		-
	information regarding this methamph ng Officer: <u>Jon L. Patrick</u> Pho	etamine laboratory, c ne 812-332-4411	ontact

- ** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- *** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.